

Table of Contents

Inpatient Measures Collected and Submitted by Hospital	
• SEP/Adverse Events/Opioid/PC/STK/VTE/ Additional eCQM Measures	Page 2
• Structural Measures/NHSN Measures/HCAHPS	Page 3
• PRO-PM/eCQM Requirements	Page 4
Claims Based Measures Calculated by CMS (Inpatient)	
• Mortality/Readmissions	Page 5
• Surg Comp/AHRQ/Cost Efficiency	Page 6
Outpatient Measures Collected and Submitted by Hospital	
• Cardiac/ED/SDOH/STK/Imaging/Structural/Other	Page 7
• NHSN Measure/OAS CAHPS/PRO-PM	Page 8
Claims Based Measures Calculated by CMS (Outpatient)	
• Outcome Measures/Imaging Efficiency	Page 8
Ambulatory Surgery Center Measures Collected and Submitted by Hospital	
• ASC Measures/SDOH/Structural Measure/NHSN Measure/OAS CAHPS	Page 9
• PRO-PM	
Claims Based Measures Calculated by CMS (ASC)	
• Outcome Measures	Page 10
Long-Term Care Hospital Measures Collected and Submitted by Hospital	
• LTCH Measures/NHSN Measures	Page 11
Claims Based Measures Calculated by CMS (LTCH)	
• Readmission Measures/Resource Use/Other Measures	Page 12
Inpatient Psychiatric Facility Measures Collected and Submitted by Hospital	
• HBIPS/SUB/TOB/IMM/TRN/MET/FLD/NHSN Measures/PIX	Page 13
Claims Based Measures Calculated by CMS (IPF)	
• Clinical Quality of Care Measures/Readmissions	Page 14
Inpatient Rehabilitation Facility Measures Collected and Submitted by Hospital	
• IRF Measures/NHSN Measures	Page 15
Claims Based Measures Calculated by CMS (IRF)	
• Resource Use/Readmission Measures	Page 16
End-Stage Renal Disease Facility Measures Collected and Submitted by Hospital	
• NHSN Measures/Other ESRD Quality Measures	Page 17
Claims Based Measures Calculated by CMS (ESRD)	
• Clinical Measures/Reporting Measures	Page 17
PPS-Exempt Cancer Hospital Measures Collected and Submitted by Hospital	
• Cancer Care/Structural Measures/HCAHPS/NHSN Measures	Page 18
Claims Based Measures Calculated by CMS (PCH)	
• Outcome Measures/Readmissions	Page 19
Rural Emergency Hospital Measures Collected and Submitted by Hospital	
• ED/SDOH/Structural Measures	Page 20
Claims Based Measures Calculated by CMS (REH)	
• Outcome Measures/Imaging	Page 20

INPATIENT Current

Measures Collected and Submitted by Hospital

MEASURE Bolded measures must be manually abstracted and submitted to HQR site quarterly.	HIQRP		VBP		HITECH
	Reporting effective date	Affects APU	Reporting effective date	Affects Reimbursement	Promoting Interoperability Program
<i>Sepsis and Septic Shock</i>					
Severe Sepsis and Septic Shock: Management Bundle Measure	Oct 2015	FY 2017	CY 2024	FY 2026	
<i>Medication-Related Adverse Events</i>					
HH-01 Hospital Harm – Severe Hypoglycemia eCQM	Mandatory CY 2026	FY 2028			Yes
HH-02 Hospital Harm – Severe Hyperglycemia eCQM	Mandatory CY 2026	FY 2028			Yes
<i>Opioid-Related Measures</i>					
Safe Use of Opioids - Concurrent Prescribing eCQM	Mandatory CY 2022	FY 2024			Yes
Hospital Harm - Opioid Related Adverse Events eCQM	Mandatory CY 2027	FY 2029			Yes
<i>Perinatal Care (PC)</i>					
ePC-02 Cesarean Birth	Mandatory CY 2024	FY 2026			Yes
ePC-07 Severe Obstetric Complications	Mandatory CY 2024	FY 2026			Yes
<i>Stroke</i>					
STK-2 Ischemic stroke patients discharged on antithrombotic therapy eCQM					Yes
STK-3 Anticoagulation therapy for atrial fibrillation/flutter eCQM					Yes
STK-5 Antithrombotic therapy by the end of hospital day two eCQM					Yes
<i>Venous Thromboembolism (VTE)</i>					
VTE-1 Venous thromboembolism Prophylaxis eCQM					Yes
VTE-2 Intensive care unit VTE prophylaxis eCQM					Yes
<i>Additional eCQM Measures</i>					
Global Malnutrition Composite Score eCQM					Yes
Modify to add ages 18-64 in CY 2026					

Proposed for CY 2026
Proposed for CY 2027
Proposed for CY 2028
Proposed for CY 2029
Proposed for CY 2030
Proposed for CY 2031

Hospital Harm – Pressure Injury eCQM	Mandatory CY 2028	FY 2030			Available for reporting CY 2025
Hospital Harm – Acute Kidney Injury eCQM	Mandatory CY 2028	FY 2030			Available for reporting CY 2025
Hospital Harm – Falls with Injury eCQM					Available for reporting CY 2026
Hospital Harm – Post-operative Respiratory Failure eCQM					Available for reporting CY 2026
Excessive Radiation Dose or Inadequate Image Quality for Diagnostic CT Adults eCQM					Available for reporting CY 2025
Structural Measures					
Maternal Morbidity	Oct 2021	FY 2023			
Hospital Commitment to Health Equity	CY 2023 End after CY 2023	FY 2025 Remove after FY 2025			
Patient Safety	CY 2025	FY 2027			
Age Friendly Hospital	CY 2025	FY 2027			
Measures Reported to NHSN					
Central Line Associated Bloodstream Infection Expand to include some non-ICU wards			Feb 2013 Jan 2017	FY 2015 FY 2019	
CLABSI-Oncology units	CY 2026	FY 2028			
Surgical Site Infection			Jan 2014	FY 2016	
Catheter-Associated Urinary Tract Infection Expand to include some non-ICU wards			Jan 2014 Jan 2017	FY 2016 FY 2019	
CAUTI-Oncology units	CY 2026	FY 2028			
MRSA Bacteremia			Jan 2015	FY 2017	
Clostridium Difficile (C. Diff)			Jan 2015	FY 2017	
Healthcare Personnel Influenza Vaccination	Jan 2013	FY 2015			
COVID-19 Vaccination Coverage among Healthcare Personnel Modified to HCP with “up-to-date” vaccines	Oct 2021 Oct 2023 End after CY 2023	FY 2023 FY 2025 Remove after FY 2025			
Patients’ Experience of Care					
HCAHPS survey	Ongoing	Ongoing	July 2011	FY 2013	
Updated survey	CY 2025	FY 2027		FY 2030	

Proposed for CY 2026
 Proposed for CY 2027
 Proposed for CY 2028
 Proposed for CY 2029
 Proposed for CY 2030
 Proposed for CY 2031

Patient-Reported Outcome Performance Measures					
THA/TKA PRO-PM Hospital-Level Total Hip Arthroplasty and/or Total Knee Arthroplasty Patient-Reported Outcome-Based Performance Measure	Voluntary for <u>procedures performed</u> 7/2023-6/2024 Required for <u>procedures performed</u> 7/2024-6/2025	Voluntary data submission will not affect APU. Required for FY2028 APU			

eCQM Reporting Requirements		
Reporting Period/Payment Determination	Total Number of eCQMs Reported	eCQMs Required to be Reported
CY 2024/FY 2026 and CY 2025/FY 2027	6	Safe Use of Opioids-Concurrent Prescribing Cesarean Birth Severe Obstetric Birth 3 additional self-selected eCQMs
CY 2026/FY 2028	8	Safe Use of Opioids-Concurrent Prescribing Cesarean Birth Severe Obstetric Birth Hospital Harm-Severe Hyperglycemia Hospital Harm-Severe Hypoglycemia 3 additional self-selected eCQMs
CY 2027/FY 2029	9	Safe Use of Opioids-Concurrent Prescribing Cesarean Birth Severe Obstetric Birth Hospital Harm-Severe Hyperglycemia Hospital Harm-Severe Hypoglycemia Hospital Harm-Opioid-Related Adverse Events 3 additional self-selected eCQMs
CY 2028/FY 2030	11	Safe Use of Opioids-Concurrent Prescribing Cesarean Birth Severe Obstetric Birth Hospital Harm-Severe Hyperglycemia Hospital Harm-Severe Hypoglycemia Hospital Harm-Opioid-Related Adverse Events Hospital Harm-Pressure Injury Hospital Harm-Acute Kidney Injury 3 additional self-selected eCQMs

Proposed for CY 2026
 Proposed for CY 2027
 Proposed for CY 2028
 Proposed for CY 2029
 Proposed for CY 2030
 Proposed for CY 2031

Claims Based Measures Calculated by CMS (Inpatient)				
MEASURE	HIQRP		VBP	
	Reporting effective date	Affects APU	Reporting effective date	Affects Reimbursement
Mortality Measures (Medicare Patients)				
Hospital 30-day, all-cause, risk-standardized mortality rate following AMI hospitalization for patients 18 and older			7/1/11	FY 2014
Hospital 30-day, all-cause, risk-standardized mortality rate following heart failure hospitalization for patients 18 and older			7/1/11	FY 2014
Hospital 30-day, all-cause, risk-standardized mortality rate following pneumonia hospitalization			7/1/11	FY 2014
Hospital 30-day, all-cause, risk-standardized mortality rate following COPD hospitalization			7/1/16	FY 2021
Hospital 30-day, all-cause, risk-standardized mortality rate following acute ischemic stroke		FY 2016		
7/2023-6/2025 Expand to include Medicare Advantage		FY 2027		
Hybrid Hospital-Wide All-Cause Mortality (Hybrid HWM)				
Hospitals report CCDEs & linking variables	Voluntary 7/2023-6/2024 7/2024-6/2025			
7/2024-6/2025 Expand to include Medicare Advantage				
Hospital 30-day, all-cause, risk-standardized mortality rate following CABG surgery			7/1/2017 – 6/30/2020	FY 2022
30-day risk-standardized death rate among surgical inpatients with complications	7/2023-6/2025	FY 2027		
Readmission Measures (Medicare Patients)				
Hybrid Hospital-Wide Readmission Measure with Claims and Electronic Health Record Data				
Hospitals report CCDEs & linking variables	Voluntary 7/2023-6/2024 7/2024-6/2025			
7/2024-6/2025 Expand to include Medicare Advantage				

Proposed for CY 2026
 Proposed for CY 2027
 Proposed for CY 2028
 Proposed for CY 2029
 Proposed for CY 2030
 Proposed for CY 2031

<i>Surgical Complications</i>				
Hip/Knee: Hospital-level risk standardized complication rate (RSCR) following elective primary total hip\total knee arthroplasty			Jan 2015	FY 2019
UPDATED Hip/Knee: Hospital-level risk standardized complication rate (RSCR) following elective primary total hip\total knee arthroplasty	4/2019-3/2022 End after March 2028	FY 2024 Remove after FY 2029		FY2030
4/2023-3/2025 Expand to include Medicare Advantage	4/2023-3/2025	FY 2027		FY 2033
<i>AHRQ and Nursing Sensitive Care</i>				
PSI-4 Death among surgical inpatients with serious, treatable complications	End after 6/30/2025	Remove after FY 2026		
<i>Cost Efficiency</i>				
Medicare spending per beneficiary Add RRB beneficiaries for FY 2016			May 2013	FY 2015
UPDATED Medicare spending per beneficiary (MSPB) Hospital Measure	End after CY 2025	FY 2024 Remove after FY 2027	CY 2026	FY 2028
Hospital-level, risk-standardized payment associated with a 30-day episode-of-care for AMI	End after 6/30/2024	FY 2016 Remove after FY 2025		
Hospital-level, risk-standardized payment associated with a 30-day episode-of-care for heart failure	End after 6/30/2024	FY 2017 Remove after FY 2025		
Hospital-level, risk-standardized payment associated with a 30-day episode-of-care for pneumonia	End after 6/30/2024	FY 2017 Remove after FY 2025		
Hospital-Level, Risk-Standardized Payment Associated with an Episode-of-Care for Elective Primary Total Hip Arthroplasty and/or Total Knee Arthroplasty Revised for FY 2024 payment determination	CY 2016 End after 3/31/2024	FY 2018 Remove after FY 2025		
Excess Days in Acute Care after Hospitalization for AMI Revised for FY 2024 payment determination		FY 2018		
Excess Days in Acute Care after Hospitalization for Heart Failure		FY 2018		
Excess Days in Acute Care after Hospitalization for Pneumonia	7/2014-6/2017	FY 2019		

Proposed for CY 2026
 Proposed for CY 2027
 Proposed for CY 2028
 Proposed for CY 2029
 Proposed for CY 2030
 Proposed for CY 2031

OUTPATIENT Current

Measures Collected and Submitted by Hospital

MEASURE	HOQRP	
	Reporting effective date	Affects APU
Cardiac Care Measures		
OP-40 ST-Segment Elevation Myocardial Infarction (STEMI) eCQM	Voluntary CY 2023 Mandatory CY 2024	CY 2026
ED Measures		
OP-18 Median time for discharged ED patients	Jan 2012 End after CY 2027	CY 2013 Remove after CY 2029
Emergency Care Access & Timeliness eCQM	Voluntary CY 2027 Mandatory CY 2028	CY 2030
Social Drivers of Health		
Screening for Social Drivers of Health	Voluntary CY 2025 Mandatory CY 2026 End before required	CY 2028 Remove prior to requirement
Screen Positive Rate for Social Drivers of Health	Voluntary CY 2025 Mandatory CY 2026 End before required	CY 2028 Remove prior to requirement
Stroke		
OP-23 Head CT or MRI scan results for acute ischemic stroke or hemorrhagic stroke patients who received head CT or MRI scan interpretation within 45 minutes of ED arrival	Jan 2012	CY 2013
Imaging		
Excessive Radiation eCQM	Voluntary CY 2025 Voluntary CY 2026 Mandatory CY 2027 Voluntary indefinitely	CY 2029 Will not affect APU
Structural Measure		
Hospital Commitment to Health Equity	CY 2025 End before required	CY 2027 Remove prior to requirement
Chart-Abstracted Measures with Aggregate Data Submission by Web-Based Tool (HQR System)		
OP-22 ED patient left without being seen	Jan-Jun 2012 Data End after CY 2027	CY 2013 Remove after CY 2029
OP-29 Colonoscopy Follow-up Interval Revise ages from "50-75" to "45-75"	April 1, 2014 CY 2024	CY 2016 CY 2026
OP-31 Cataracts visual function	Voluntary CY 2015	
CY 2024 Limit options for survey instrument used		

Proposed for CY 2026
 Proposed for CY 2027
 Proposed for CY 2028
 Proposed for CY 2029
 Proposed for CY 2030
 Proposed for CY 2031

Measures Reported to NHSN		
OP-38 COVID-19 Vaccination Coverage among Healthcare Personnel	CY 2022	CY 2024
Modified to HCP with “up-to-date” vaccines	CY 2024 End after CY 2023	CY 2026 Remove after CY 2025
Patients’ Experience of Care		
OP-37a-37e OAS CAHPS	Voluntary CY 2023 Mandatory CY 2024	CY 2026
Patient-Reported Outcome Performance Measure		
OP-42 PRO-PM Following Elective Primary Total Hip Arthroplasty and/or Total Knee Arthroplasty in the HOPD Setting	Voluntary CY 2025 Voluntary CY 2026 Voluntary CY 2027 Mandatory CY 2028	CY 2031
PRO-PM Patient Understanding of Key Information Related to Recovery After a Facility-Based Outpatient Procedure or Surgery Information Transfer PRO-PM	Voluntary CY 2026 Mandatory CY 2027	CY 2029

Claims Based Measures Calculated by CMS (Outpatient)

MEASURE	HOQRP	
	Reporting effective date	Affects APU
Outcome Measures		
OP-32 Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy	CY 2016	CY 2018
OP-35 Admissions and Emergency Department Visits for Patients Receiving Outpatient Chemotherapy	CY 2018	CY 2020
OP-36 Hospital Visits after Hospital Outpatient Surgery	CY 2018	CY 2020
Imaging Efficiency Measures		
OP-8 MRI lumbar spine for low back pain	Ongoing End after 2024	Ongoing Remove after CY 2026
OP-10 Abdomen computed tomography (CT) use of contrast material	Ongoing	Ongoing
OP-13 Cardiac imaging for preoperative risk assessment for non-cardiac low-risk surgery	CY 2010 End after 2024	CY 2012 Remove after CY 2026
OP-39 Breast Screening Recall Rates	July 2020 – June 2021	CY 2023

Proposed for CY 2026
 Proposed for CY 2027
 Proposed for CY 2028
 Proposed for CY 2029
 Proposed for CY 2030
 Proposed for CY 2031

AMBULATORY SURGERY CENTER Current and Proposed		
Measures Collected and Submitted by Hospital		
	ASCQR Program	
MEASURE	Reporting effective date	Affects APU
<i>Measures Submitted through the CMS Web-Based Tool (HQR System)</i>		
ASC-1 Patient Burn	CY 2023	CY 2025
ASC-2 Patient Fall	CY 2023	CY 2025
ASC-3 Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant	CY 2023	CY 2025
ASC-4 Hospital Transfer/Admission	CY 2023	CY 2025
ASC-9 Endoscopy/Poly surveillance: Appropriate follow-up interval for normal colonoscopy in average risk patients	April 1, 2014	CY 2016
Revise ages from "50-75" to "45-75"	CY 2024	CY 2026
ASC-11 Cataracts Visual Function	Voluntary CY 2015	
CY 2024 Limit options for survey instrument used		
ASC-13 Normothermia Outcome	CY 2018	CY 2020
ASC-14 Unplanned Anterior Vitrectomy	CY 2018	CY 2020
<i>Social Drivers of Health</i>		
Screening for Social Drivers of Health	Voluntary CY 2025 Mandatory CY 2026 End before required	CY 2028 Remove prior to requirement
Screen Positive Rate for Social Drivers of Health	Voluntary CY 2025 Mandatory CY 2026 End before required	CY 2028 Remove prior to requirement
<i>Structural Measure</i>		
Hospital Commitment to Health Equity	CY 2025 End before required	CY 2027 Remove prior to requirement
<i>Measures Reported to NHSN</i>		
ASC-20 COVID-19 Vaccination Coverage among Healthcare Personnel	CY 2022	CY 2024
Modified to HCP with "up-to-date" vaccines	CY 2024 End after CY 2023	CY 2026 Remove after CY 2025
<i>Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems</i>		
ASC-15a-e OAS CAHPS	Voluntary CY 2024 Mandatory CY 2025	CY 2027

Proposed for CY 2026
 Proposed for CY 2027
 Proposed for CY 2028
 Proposed for CY 2029
 Proposed for CY 2030
 Proposed for CY 2031

Patient-Reported Outcome Performance Measure		
PRO-PM Following Elective Primary Total Hip Arthroplasty and/or Total Knee Arthroplasty in the ASC Setting	Voluntary CY 2025 Voluntary CY 2026 Voluntary CY 2027 Mandatory CY 2028	CY 2031
PRO-PM Patient Understanding of Key Information Related to Recovery After a Facility-Based Outpatient Procedure or Surgery	Voluntary CY 2027 Voluntary CY 2028 Mandatory CY 2029	CY 2031

Claims Based Measures Calculated by CMS		
	ASCQR Program	
MEASURE	Reporting effective date	Affects APU
Outcome Measures		
ASC-12 Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy	CY 2016	CY 2018
ASC-17 Hospital Visits after Orthopedic Ambulatory Surgical Center Procedures	CY 2019 & 2020	CY 2022
ASC-18 Hospital Visits after Urology Ambulatory Surgical Center Procedures	CY 2019 & 2020	CY 2022
ASC-19 Facility-Level 7-Day Hospital Visit after General Surgery Procedures Performed at ASC.	CY 2021 & 2022	CY 2024

Proposed for CY 2026
 Proposed for CY 2027
 Proposed for CY 2028
 Proposed for CY 2029
 Proposed for CY 2030
 Proposed for CY 2031

<u>LONG-TERM CARE HOSPITAL</u> Current		
Measures Collected and Submitted by Hospital		
	LTCHQR Program	
MEASURE	Reporting effective date	Affects APU
<i>Chart-Abstracted Measures Reported Using the CMS Designated Data Submission System</i>		
Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury	July 2018	FY 2020
Percent of Residents Experiencing One or More Falls with Major Injury	April 2016	FY 2018
Change in Mobility among LTCH Patients Requiring Ventilator Support	April 2016	FY 2018
Drug Regimen Review Conducted with Follow-Up for Identified Issues	April 2018	FY 2020
Compliance with Spontaneous Breathing Trial (SBT) by Day 2 of the LTCH Stay.	July 2018	FY 2020
Ventilator Liberation Rate	July 2018	FY 2020
Transfer of Health Information to the Provider, Post-Acute Care	Oct 2020	FY2022
Transfer of Health Information to the Patient, Post-Acute Care	Oct 2020	FY2022
Discharge Function Score	CY 2023	FY 2025
COVID-19 Vaccine Percent of Patients/Residents Who Are Up to Date	Oct 2024	FY 2026
<i>Measures Reported to NHSN</i>		
Urinary Catheter-Associated Urinary Tract Infection (CAUTI)	Oct 2012	FY 2014
Central Line Catheter-Associated Bloodstream Infection (CLABSI)	Oct 2012	FY 2014
Facility-wide Inpatient Hospital-onset Clostridium difficile Infection (CDI) Outcome Measure	Jan 2015	FY 2017
Influenza Vaccination coverage among healthcare personnel	Oct 2014	FY 2016
COVID-19 Vaccination Coverage among Healthcare Personnel	Oct 2021	FY 2023
Modified to HCP with “up to date” vaccines	Oct 2023	FY 2025

Claims Based Measures Calculated by CMS (Long-Term Care Hospitals)		
		LTCHQR Program
MEASURE	Reporting effective date	Affects APU
<i>Resource Use and Other Measures (IMPACT)</i>		
Potentially Preventable 30-day Post-Discharge Readmission Measure	CY 2016 and 2017	FY 2018
Medicare Spending Per Beneficiary	CY 2016 and 2017	FY 2018
Discharge to Community – PAC LTCH QRP	CY 2016 and 2017	FY 2018

<u>INPATIENT PSYCHIATRIC FACILITIES</u> Current		
Measures Collected and Submitted by Hospital		
	IPFQR Program	
MEASURE	Reporting effective date	Affects APU
<i>Hospital Based Inpatient Psychiatric Services</i>		
HBIPS-2 Hours of physical restraint use	Oct 2012	FY 2014
HBIPS-3 Hours of seclusion use	Oct 2012	FY 2014
<i>Substance Use</i>		
SUB-2 Alcohol Use Brief Intervention Provided or Offered	Jan 2016	FY 2018
SUB-2a Alcohol Use Brief Intervention	Jan 2016	FY 2018
SUB-3 Alcohol and Drug Use Disorder Treatment Provided or Offered at Discharge	Jan 2017	FY 2019
SUB-3a Alcohol and Drug Use Disorder Treatment at Discharge	Jan 2017	FY 2019
<i>Tobacco Treatment</i>		
TOB-3 Tobacco Treatment Provided or Offered at Discharge	Jan 2016	FY 2018
TOB-3a Tobacco Treatment at Discharge	Jan 2016	FY 2018
<i>Immunization</i>		
IMM-2 Influenza Immunization	Oct 2015	FY 2017
<i>Transition of Care</i>		
Transition Record with Specified Elements Received by Discharged Patients	Jan 2017	FY 2019
<i>Metabolic Disorders</i>		
Screening for Metabolic Disorders	Jan 2017	FY 2019
<i>Facility-Level Data</i>		
Submit aggregate population counts by diagnostic group	CY 2015	FY 2017
Submit aggregate population counts by payer	CY 2015	FY 2017
<i>Measures Reported to NHSN</i>		
COVID-19 Vaccination Coverage among HCP Modified to HCP with “up to date” vaccines	Oct 2021 Oct 2023 Remove after CY 2023	FY2023 FY 2025 Remove after FY 2025
<i>Patients’ Experience of Care</i>		
PIX Survey	Voluntary CY 2025 Mandatory CY 2026	FY 2028

Claims Based Measures Calculated by CMS		
	IPFQR Program	
MEASURE	Reporting effective date	Affects APU
<i>Clinical Quality of Care Measure</i>		
Follow-up After Psychiatric Hospitalization	July 2021 – June 2022	FY 2024
Medication Continuation following Discharge from an IPF	July 2017 – June 2019	FY 2021
30-Day, Risk-Standardized All-Cause ED Visit Following an IPF Discharge	CY 2025	FY 2027
<i>Readmission Measure</i>		
30 Day All-Cause Unplanned Readmission Following Psychiatric Hospitalization in an IPF		FY 2019

INPATIENT REHABILITATION FACILITY Current and Proposed		
Measures Collected and Submitted by Hospital		
	IRF QRP	
MEASURE	Reporting effective date	Affects APU
<i>Chart-Abstracted Measures Reported Through IRF-Patient Assessment Instrument (IRF-PAI)</i>		
Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury	Oct 2018	FY 2020
Application of Percent of Residents Experiencing One or More Falls with Major Injury	Oct 2016	FY 2018
Discharge Self-Care Score for Medical Rehabilitation Patients (NQF#2635)	Oct 2016	FY 2018
Discharge Mobility Score for Medical Rehabilitation Patients (NQF#2636)	Oct 2016	FY 2018
Drug Regimen Review Conducted with Follow-Up for Identified Issues	Oct 2018	FY 2020
Transfer of Health Information to the Provider, Post-Acute Care	Oct 2020	FY2022
Transfer of Health Information to the Patient, Post-Acute Care	Oct 2020	FY2022
Discharge Function Score	CY 2023	FY 2025
COVID-19 Vaccine Percent of Patients/Residents Who Are Up to Date	Oct 2024 End after 9/30/25	FY 2026 Remove after FY 2027
<i>Measures Reported to NHSN</i>		
Urinary Catheter-Associated Urinary Tract Infection (CAUTI) (NQF#0138)	Oct 2012	FY 2014
NHSN Facility-wide Inpatient Hospital-Onset Clostridium Difficile Infection (CDI) Outcome Measure (NQF#1717)	Jan 2015	FY 2017
Influenza Vaccination Coverage among Healthcare Personnel (NQF#0431)	Oct 2014	FY 2016
COVID-19 Vaccination Coverage among Healthcare Personnel Modified to HCP “up to date” with vaccines	Oct 2021 Oct 2023 End after CY 2023	FY2023 FY 2025 Remove after FY 2025

Claims Based Measures Calculated by CMS (Inpatient Rehab Facilities)		
	IRF QRP	
MEASURE	Reporting effective date	Affects APU
<i>Resource Use and Other Measures (IMPACT)</i>		
Discharge to Community	CY 2016 and 2017	FY 2018
Medicare Spending Per Beneficiary	CY 2016 and 2017	FY 2018
Potentially Preventable 30-day Post-Discharge Readmission Measure for IRFs	CY 2016 and 2017	FY 2018
Potentially Preventable Within Stay Readmission Measure for IRFs	CY 2016 and 2017	FY 2018

END-STAGE RENAL DISEASE FACILITY Current and Proposed		
Measures Collected and Submitted by Facility		
	ESRD QIP	
MEASURE	Reporting effective date	Affects Reimbursement
<i>Measures Reported to NHSN</i>		
Bloodstream Infection in Hemodialysis Outpatients	2014	PY 2016
Dialysis Event Reporting	CY 2017 End after CY 2024	PY 2019 Remove after PY 2026
COVID-19 Vaccination Coverage among Healthcare Personnel Modified to HCP with “up to date” vaccines	CY 2023 CY 2024	PY 2025 PY 2026
<i>Measures Reported through ESRD Quality Reporting System</i>		
ICH CAHPS	2012	PY 2014
Hypercalcemia (NQF#1454)	2014	PY 2016
Clinical Depression Screening and Follow-Up	2016	PY 2018
Hemodialysis Vascular Access: Long-Term Catheter Rate (NQF#2978)	CY 2019	PY 2021
Percentage of Prevalent Patients Waitlisted	CY 2020	PY 2022
Medication Reconciliation	CY 2020	PY 2022
Hospital Commitment to Health Equity	CY 2024 End after CY 2024	PY 2026 Remove after PY 2026
Screening for Social Drivers of Health	CY 2025 End before required	PY 2027 Remover prior to requirement
Screen Positive Rate for SDOH	CY 2025 End before required	PY 2027 Remover prior to requirement
Claims Based Measures Calculated by CMS		
	ESRD QIP	
MEASURE	Reporting effective date	Affects Reimbursement
Kt/V Dialysis Adequacy Comprehensive	CY 2017 End after CY 2024	PY 2019 Remove after PY 2026
Kt/V Dialysis Adequacy Measure Topic	CY 2025	PY 2027
Standardized Readmission Ratio (SRR)	CY 2015	PY 2017
Standardized Transfusion Ratio (STRR)	CY 2016	PY 2018
Standardized Hospitalization Ratio (SHR)	CY 2018	PY 2020

Proposed for CY 2026
 Proposed for CY 2027
 Proposed for CY 2028
 Proposed for CY 2029
 Proposed for CY 2030
 Proposed for CY 2031

PPS – EXEMPT CANCER HOSPITALS Current		
Measures Collected and Submitted by Facility		
	PCHQR Program	
MEASURE	Reporting effective date	Effective Program Years
Documentation of Goals of Care Discussion among Cancer Patients	CY 2024	FY 2026
Structural Measures		
Patient Safety	CY 2025	FY 2027
Patients' Experience of Care		
HCAHPS survey	April 2014	FY 2016
Updated survey	CY 2025	FY 2027
Measures Reported to NHSN		
Catheter Associated Urinary Tract Infection	Jan 2013	FY 2014
Central Line Associated Bloodstream Infection	Jan 2013	FY 2014
Surgical Site Infection	Jan 2014	FY 2015
Facility-wide Inpatient Hospital-onset Clostridium difficile Infection (CDI) Outcome Measure	Jan 2016	FY 2018
Facility-wide Inpatient Hospital-onset Methicillin-resistant Staphylococcus aureus (MRSA) Bacteremia Outcome Measure	Jan 2016	FY 2018
Influenza Vaccination Coverage Among Healthcare Personnel	Oct 2016	FY 2018
COVID-19 Vaccination Coverage among Healthcare Personnel	Oct 2021	FY2023
Modified to HCP with "up to date" vaccines	Oct 2023	FY 2025

Proposed for CY 2026
Proposed for CY 2027
Proposed for CY 2028
Proposed for CY 2029
Proposed for CY 2030
Proposed for CY 2031

Claims Based Measures Calculated by CMS		
	PCHQR Program	
MEASURE	Reporting effective date	Effective Program Year
Admissions and Emergency Department Visits for Patients Receiving Outpatient Chemotherapy	July 2016 - June 2017	FY 2019
EOL-Chemo: Proportion of Patients Who Died from Cancer Receiving Chemotherapy in the Last 14 Days of Life (NQF#0210)	July 2017- June 2018	FY 2020
EOL-Hospice: Proportion of Patients Who Died from Cancer Not Admitted to Hospice (NQF#0215)	July 2017 -June 2018	FY 2020
EOL-ICU: Proportion of Patients Who Died from Cancer Admitted to the ICU in the Last 30 Days of Life (NQF#0213)	July 2017 - June 2018	FY 2020
EOL-3DH: Proportion of Patients Who Died from Cancer Admitted to Hospice for Less than Three Days (NQF#0216)	July 2017 - June 2018	FY 2020
30-Day Unplanned Readmissions for Cancer Patients (NQF #3188)	Oct 2018 – Sept 2019	FY 2021
Surgical Treatment Complications for Localized Prostate Cancer	July 2019 – June 2020	FY 2022

Proposed for CY 2026
Proposed for CY 2027
Proposed for CY 2028
Proposed for CY 2029
Proposed for CY 2030
Proposed for CY 2031

RURAL EMERGENCY HOSPITAL Current

Measures Collected and Submitted by Hospital

REHQR Program		
MEASURE	Reporting effective date	Affects APU
<i>ED Throughput</i>		
OP-18 Median Time from ED Arrival to ED Departure for Discharged ED Patients	CY 2024	CY 2026
Emergency Care Access & Timeliness eCQM Optional measure hospitals can report on in lieu of OP-18	CY 2027	CY 2029
<i>Social Drivers of Health</i>		
Screening for Social Drivers of Health	Voluntary CY 2025 Mandatory CY 2026 End before required	CY 2028 Remove prior to requirement
Screen Positive Rate for Social Drivers of Health	Voluntary CY 2025 Mandatory CY 2026 End before required	CY 2028 Remove prior to requirement
<i>Structural Measures</i>		
Hospital Commitment to Health Equity	CY 2025 End before required	CY 2027 Remove prior to requirement

Claims Based Measures Calculated by CMS (REH)

REHQR Program		
MEASURE	Reporting effective date	Affects APU
<i>Outcome Measures</i>		
Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy	CY 2024 thru CY 2026	CY 2028
Risk-Standardized Hospital Visits Within 7 Days after Hospital Outpatient Surgery	CY 2024 CY 2024 and CY 2025	CY 2026 CY 2027
<i>Imaging Efficiency Measures</i>		
Abdomen Computed Tomography (CT) Use of Contrast Material	CY 2024	CY 2026

Prepared by the Indiana Hospital Association 8/11/2025

Proposed for CY 2026
Proposed for CY 2027
Proposed for CY 2028
Proposed for CY 2029
Proposed for CY 2030
Proposed for CY 2031